

BEKI-BJ Kadima Membership Form 2013 – 2014

First Name _____ Last Name _____

Address _____

City _____ Zip Code _____

Home Phone _____ Student's Cell Phone _____

Student's Email Address _____ Birthday _____

Bar/Bat Mitzvah Date _____ Grade _____

Name of School Currently Attending _____

Synagogue Affiliation _____

Parent Names _____

Parent email addresses _____

Parent cell phones _____

Medical information the advisor should know about. (*Please include food and other allergies, asthma or other medical situations, current medications*).

I understand that being a member of Kadima involves certain rights and responsibilities. I am expected to participate fully and cooperate with the leaders at all events which I attend. I know that I have a responsibility to myself and the Jewish community to participate in religious services when asked to do so. I know Kadima needs my energy and my ideas - you can count on me!

Student's Signature _____ *Date* _____

I give permission for my child to participate in all chapter events and to be driven by other parents as needed.

Parent's signature _____ *Date* _____

Dues Schedule: (Your dues support our youth programs and make Kadima possible - thank you!)
Please make checks payable to 'BEKI-BJ Kadima'

- Check one (1): 1 year dues: \$ 30
 2 years dues: \$ 55
 3 years dues: \$ 80
 4 years dues: \$100

Send to: Emily Zaghi, BEKI-BJ KADIMA Youth Group Coordinator
123 York Street #4B New Haven, CT 06511 *Subject:* BEKI-BJ Kadima

Questions? Concerns? Ideas? Contact Emily Zaghi BEKI-BJ Youth Group Coordinator
bekibjkadima@gmail.com or (516) 316-6154

Don't Forget! Check out our blog at [http://bekibjkadima.blogspot.com/!](http://bekibjkadima.blogspot.com/)